MAIL THE COMPLETED FORM TO: The Appropriate State or EPA Regional Office.	United States Environmental Protection Agen RCRA SUBTITLE C SITE IDENTIFICAT	REC'D FEB 10 2003				
1. Reason for Submittal (See instructions on	Reason for Submittal: ☐ To provide Initial Notification of Regulated Waste Activity (to obtain an EPA ID Number for hazardous waste, universal					
page 23)	waste, or used oil activities).					
MARK CORRECT BOX(ES)	To provide Subsequent Notification of Regulated Waste Activity (to update site identification information).					
	 □ As a component of a First RCRA Hazardous Waste Part A Permit Application. □ As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment #). 					
	☐ As a component of the Hazardous Waste Report.	arrill Application (Amendi	Hent #			
2. Site EPA ID Number (See instructions on page 24)	EPA ID Number: ルAD のよう ららら いよる					
3. Site Name (See instructions on page 24)	Name: ELECTROLUX HOME PRODUCTS (FORMALLY FRIGIDAIRE)					
4. Site Location	Street Address: 60) E. CENTRAL AUE.					
Information (See instructions on page 24)	City, Town, or Village: TEFFER SON	State: TowA				
	County Name: USA	Zip Code: 50/29				
5. Site Land Type (See instructions on page 24)	Site Land Type: X Private County District Indian Municipal State Other					
North American Industry lassification System	A 335224 B.					
Site (See instructions on page 24)	C. D.	D.				
7. Site Mailing Address	Street or P. O. Box: SAME		计划程序 1965年			
(See instructions on page 25)	City, Town, or Village:					
	State:					
	Country:	Zip Code:				
8. Site Contact Person (See instructions on page 25)	First Name: PAUL MI: 5	Last Name:	OPE			
	Phone Number: 515 386-1105	Phone Number Extension:				
9. Legal Owner and Operator of the Site (See	A. Name of Site's Legal Owner: ELECTROLUX HOME PRODUCTS Date Became Owner (mm/dd/yyyy): 01-01-87					
instructions on pages 25 to 26)	Owner Type: Private	☐ Indian ☐ Municipal ☐ State ☐ Other				
	B. Name of Site's Operator:	Date Became Operator (mm/dd/yyyy):				
	Operator Type: ☐ Private ☐ County ☐ District ☐ Federal ☐ Indian ☐ Municipal ☐ State ☐ Other					



RCRA RECORDS CENTER

by Opened on 02/13/03
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				OMB#: 2050-0175 Expires 12/31/200			
				EPAID No.			
10. Type of Regulated Waste Activ	ity (Mark the appropr	riate boxes for activi	ties that ap	pply to your site. See instructions on pages 26 to 30)			
A. Hazardous Waste Activities							
Generator of Hazardous Wa (Choose only one of the following)		es.)	For	or Items 2 through 6, mark all that apply.			
(Choose only one of the following three categories.) a. LQG: Greater than 1,000 kg/mo (2,200 lbs./mo.) of non-acute hazardous waste; or b. SQG: 100 to 1,000 kg/mo (220 - 2,200 lbs./mo.) of non-acute hazardous waste; or c. CESQG: Less than 100 kg/mo (220 lbs./mo.) of non-acute hazardous waste (No Hayalana Waste) In addition, indicate other generator activities. (Mark all that apply) d. United States Importer of Hazardous Waste e. Mixed Waste (hazardous and radioactive) Generator			us	 2. Transporter of Hazardous Waste 3. Treater, Storer, or Disposer of Hazardous Waste (at your site) Note: A hazardous waste permit is required for this activity. 4. Recycler of Hazardous Waste (at your site) Note: A hazardous waste permit may be required for this activity. 5. Exempt Boiler and/or Industrial Furnace a. Small Quantity On-site Burner Exemption b. Smelting, Melting, and Refining Furnace Exemption 			
				☐ 6. Underground Injection Control			
B. Universal Waste Activities 1. Large Quantity Handler of Umore) [refer to your State re Indicate types of universal visite. (Mark all boxes that a a a. Batteries b. Pesticides c. Thermostats d. Lamps e. Other (specify) f. Other (specify) g. Other (specify)	egulations to determinate generated and/pply): Generate Generate	ne what is regulated]. our	 Used Oil Activities (Mark all boxes that apply.) Used Oil Transporter - Indicate Type(s) of Activity(ies) a. Transporter b. Transfer Facility Used Oil Processor and/or Re-refiner - Indicate Type(s) of Activity(ies) a. Processor b. Re-refiner Off-Specification Used Oil Burner Used Oil Fuel Marketer - Indicate Type(s) of Activity(ies) a. Marketer Who Directs Shipment of Off-Specification Used Oil Burner b. Marketer Who First Claims the Used Oil Meets the Specifications 			
Note: A hazardous waste perr	nit may be required for	this activity.					
11. Description of Hazardous Was	tes (See instructions	on page 31)					
A. Waste Codes for Federally Regula the order they are presented in the	ated Hazardous Wast regulations (e.g., D001	es. Please list the wa, D003, F007, U112).	ste codes o Use an add	of the Federal hazardous wastes handled at your site. List them in dditional page if more spaces are needed.			
NA							
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			EPA ID No.	1AD047	055140	
3. Waste Codes for State-Regulated (i.e., r it your site. List them in the order they are pr	non-Federal) Hazardous resented in the regulations	Wastes. Please list the s. Use an additional page	waste codes of the Star e if more spaces are ne	te-regulated hazardo eded for waste codes	us wastes handled	
NA						
12. Comments (See instructions on page 3	1)					
No longer hou	e ary	Hazardous	Waste			
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- Ship out granos	. 100 F	larescent	- When y	farrey	rely	
- QD' \		- 0.0	VA (1	1 0	/	
- Stip out approx. 5 to 6,000 bles of Non-Hayordown Special						
Waste: 1e: Honing Oil, feltere, Petroleum Distillation						
#'s 92090083 + #'s 95100403	1FAZZ	A PLAN AS A MET NAME OF THE PARTY.				
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13. Certification. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. (See instructions on page 31)						
Signature of owner, operator, or an authorized representative	Name and Official Title (type or print) Date Signed (mm/dd/yyyy)					
Pope	PAUL POPE	E ENU., H	SALT# 5 A	ret y mgr	12-12-02	
The state of the s						

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MAIL THE COMPLETED FORM TO: The Appropriate State or EPA Regional Office.	United States Environmental Prote RCRA SUBTITLE C SITE IDENT		FEB 10 2003			
Reason for Submittal (See instructions on page 23) MARK CORRECT BOX(ES)	Reason for Submittal: To provide Initial Notification of Regulated Waste Activity (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities). To provide Subsequent Notification of Regulated Waste Activity (to update site identification information). As a component of a First RCRA Hazardous Waste Part A Permit Application.					
	□ As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment #). □ As a component of the Hazardous Waste Report.					
2. Site EPA ID Number (See instructions on page 24)	EPA ID Number: (ノ AD (の47) (2)らら、ノ サム					
3. Site Name (See instructions on page 24)	Name: ELECTROLUX HOME PRODUCTS (FORMALLY FRIGIDAIRE)					
4. Site Location Information (See	Street Address: 60) 6, CENTRAL AUE,					
instructions on page 24)	City, Town, or Village: TEFFER SON	State: TowA				
	County Name: USA		Zip Code: 50/29			
5. Site Land Type (See instructions on page 24)	Site Land Type: ☑ Private ☐ County ☐ District ☐ Federal ☐ Indian ☐ Municipal ☐ State ☐ Other					
6. North American Industry Classification System (NAICS) Code(s) for the	A. 335224 B.					
Site (See instructions on page 24)	C.	D.				
7. Site Mailing Address	Street or P. O. Box: SAME					
(See instructions on page 25)	City, Town, or Village:					
	State:					
	Country:		Zip Code:			
8. Site Contact Person (See instructions on page 25)	First Name: PAUL	MI: 5	Last Name:	OPE		
,	Phone Number: 5/5 386-110	Phone Number Extension:				
9. Legal Owner and Operator of the Site (See	A. Name of Site's Legal Owner: ELECTROLUX HOME PRODUC	Date Became Owner (mm/dd/yyyy):				
instructions on pages 25 to 26)	Owner Type: X Private	Indian ☐ Municipal ☐ State ☐ Other				
	B. Name of Site's Operator:	Date Became Operator (mm/dd/yyyy):				
	Operator Type: ☑ Private ☐ County ☐ District ☐ Federal ☐ Indian ☐ Municipal ☐ State ☐ Other					

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1 AD047055140 EPA ID No. Type of Regulated Waste Activity (Mark the appropriate boxes for activities that apply to your site. See instructions on pages 26 to 30) A. Hazardous Waste Activities For Items 2 through 6, mark all that apply. 1. Generator of Hazardous Waste (Choose only one of the following three categories.) 2. Transporter of Hazardous Waste ☐ a. LQG: Greater than 1,000 kg/mo (2,200 lbs./mo.) of non-acute ☐ 3. Treater, Storer, or Disposer of Hazardous Waste (at your hazardous waste; or site) Note: A hazardous waste permit is required for this ☐ b. SQG: 100 to 1,000 kg/mo (220 - 2,200 lbs./mo.) of non-acute activity. hazardous waste: or ☐ 4. Recycler of Hazardous Waste (at your site) Note: A x c. CESQG: Less than 100 kg/mo (220 lbs./mo.) of non-acute hazardous hazardous waste permit may be required for this activity. (no Hajadana Waste) 5. Exempt Boiler and/or Industrial Furnace In addition, indicate other generator activities. (Mark all that apply) a. Small Quantity On-site Burner Exemption ☐ d. United States Importer of Hazardous Waste ☐ b. Smelting, Melting, and Refining Furnace Exemption ☐ e. Mixed Waste (hazardous and radioactive) Generator ☐ 6. Underground Injection Control NA **B.** Universal Waste Activities C. Used Oil Activities (Mark all boxes that apply.) NA 1. Large Quantity Handler of Universal Waste (accumulate 5,000 kg or 1. Used Oil Transporter - Indicate Type(s) of Activity(ies) more) [refer to your State regulations to determine what is regulated]. □ a. Transporter Indicate types of universal waste generated and/or accumulated at your □ b. Transfer Facility site. (Mark all boxes that apply): 2. Used Oil Processor and/or Re-refiner - Indicate Type(s) Generate Accumulate of Activity(ies) a. Processor a. Batteries ☐ b Re-refiner b. Pesticides ☐ 3. Off-Specification Used Oil Burner c. Thermostats d. Lamps 4. Used Oil Fuel Marketer - Indicate Type(s) of Activity(ies) e. Other (specify) _ ☐ a. Marketer Who Directs Shipment of Off-Specification f. Other (specify) Used Oil to Off-Specification Used Oil Burner g. Other (specify) ☐ b. Marketer Who First Claims the Used Oil Meets the Specifications ☐ 2. Destination Facility for Universal Waste Note: A hazardous waste permit may be required for this activity. Description of Hazardous Wastes (See instructions on page 31) A. Waste Codes for Federally Regulated Hazardous Wastes. Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more spaces are needed.

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12. Comments (See in	structions on page 31)				
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system designed to ass manage the system, or	sure that qualified person those persons directly applete. I am aware that	nnel properly gather and responsible for gathering there are significant pen	d evaluate the informa g the information, the i	prepared under my direct tion submitted. Based on in nformation submitted is, to lse information, including	my inquiry of the pers the best of my know	on or persons who ledge and belief,
Signature of owne authorized re		Name and Official Title (type or print) Date Signed (mm/dd/yyyy)				
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